

TRANSMITTAL LETTER

P02000009506

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-01/22/02--01049--011
*****87.50 *****87.50

SUBJECT: COMPLETELY CONNECTED COMMUNICATIONS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: JOYCE ROBERSON
Name (Printed or typed)

13784 BLUE LAGOON WAY
Address

ORLANDO, FL 32828
City, State & Zip

(407) 382-4858

Daytime Telephone number

FILED
02 JAN 22 PM 2:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOTE: Please provide the original and one copy of the articles.

01-28-02

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

COMPLETELY CONNECTED COMMUNICATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13784 BLUE LAGOON WAY
ORLANDO, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ESTABLISH A RETAIL TELEPHONE AND ACCESORIES STORE.

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND (1,000) COMMON - NO PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOYCE ROBERSON
13784 BLUE LAGOON WAY
ORLANDO, FL 32828

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

JOYCE ROBERSON
13784 BLUE LAGOON WAY
ORLANDO, FL 32828

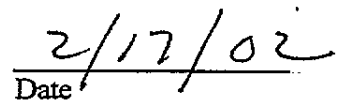
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

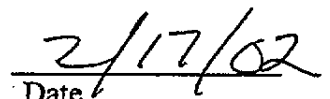
JOYCE ROBERSON
13784 BLUE LAGOON WAY
ORLANDO, FL 32828

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent


Date


Signature/Incorporator


Date

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TALLAHASSEE FLORIDA